

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND			
1 Date of Request: <u>7/31/07</u>		2 Serial/Patent # <u>10/026,482</u>	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
			6 AMOUNT
<input type="checkbox"/>	Filing		\$
<input type="checkbox"/>	Amendment		\$
<input checked="" type="checkbox"/>	Extension of Time		\$ 1020.00
<input type="checkbox"/>	Notice of Appeal/Appeal		\$
<input type="checkbox"/>	Petition		\$
<input type="checkbox"/>	Issue		\$
<input type="checkbox"/>	Cert of Correction/Terminal Disc.		\$
<input type="checkbox"/>	Maintenance		\$
<input type="checkbox"/>	Assignment		\$
<input type="checkbox"/>	Other		\$
		7 TOTAL AMOUNT OF REFUND	
		\$	
10 REASON:		8 TO BE REFUNDED BY:	
		<input checked="" type="checkbox"/> Treasury Check <input checked="" type="checkbox"/> Credit Deposit A/C #: <u>50--0911</u>	
<input type="checkbox"/>	Overpayment		
<input type="checkbox"/>	Duplicate Payment		
<input checked="" type="checkbox"/>	No Fee Due (Explanation):		
<u>Paid after maximum extendable period for reply.</u>			
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>Kimberly Inabinet</u>		TITLE: <u>Petitions Examiner</u>	
SIGNATURE: <u>Kimberly Inabinet</u>		PHONE: <u>x24618</u>	
OFFICE: <u>Office of Petitions</u>			
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: <u>CKH</u>		DATE: <u>8/9/07</u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: